Indiana State Police Methamphetamine Laboratory Occurrence Report

This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	<u>08-06-08</u>	Address:	1203 CASSOPOLIS ST
Case #:	24F29504		<u>ELKHART, IN</u> 46514
County:	ELKHART		
Type of Laboratory Seizure (check one)		Scizure Location (check all that apply)	
	onal Lab al/Glassware/Equipment (only) te (only)	Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☐ Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): BASEMENT			
Red Phosphorous/Iodine Reaction(s);			
☐ Flammable Solvents: BASEMENT			
Water Reactive Metal (Lithium): BASEMENT			
Anhydrous Ammonia: BASEMENT			
☐ Hydrochloric Acid Gas Generator(s): BASEMENT/BURNT			
Corrosive Acid: BASEMENT			
Corrosive Base:			
Other (item and location);			
Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services		Investigative Information Ephcdrinc/Pseudoephedrine Tracking Log Rotail/Merchant Tip Other:	
This report is to be faxed to the following agencies that serve the location:			
Fire Departs	ment: ELKHART CITY	Fax: <u>574-5</u>	
Health Department: ELKHART CNTY		Fax: <u>574-2</u> Fax:	
Child Protec	ction Service: <u>N/A</u>	- 	-
For further information regarding this methamphetamine laboratory, contact Investigating Officer: <u>BRAD A. KAIZER</u> Phone <u>574-234-4157</u>			

^{**} This form is to be faxed to the Pire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.

^{***} This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.